SSNAP Sentinel Stroke National Audit Programme



SSNAP Ambulance Dataset

For queries, please contact <u>ssnap@kcl.ac.uk</u> Webtool for data entry: <u>www.strokeaudit.org</u>

Hospital / Team Patient Audit Number/Name/DOB NHS Number		Auto-completed on web tool	
		Auto-completed on web tool	
		Auto-completed on web tool	
1.12.0 Hospital (SSNAP data)		ta)	Auto-completed on web tool
a)	Is this the recorded hospital according to your Ambulance Trust records? Yes O $$ No $$ O $$		
b)	Select the correct team code (If No)		Drop-down of all hospitals
1.12.1	Ambulance trust (SSNAP data)		Auto-completed on web tool
1.12.2	CAD number (SSNAP data)		Auto-completed on web tool
,	Is the CAD number entered in SSNAP correct? Enter correct CAD number (If No)		Yes O No O
			11 character
1.12.3	Date and time of 999 call being connected to the ambulance service by the operator dd mm yyyy hh mm		
1.12.4	Date and time of arrival at patient location dd mm yyyy hh mm		
1.12.5	Date and time of departure from patient location dd mm yyyy		
1.12.6	Date and time of arrival outside the hospital		
a) As measured by the time at which the wheels stop			
dd mm yyyy hh mm Not Known O			
b) If wheels stop time is not known, as measured by the mobile data terminals			
1.12.7	Was the patient FAST positive at any time during the incident? OYes ONo OUnable to assess ONot recorded		
1.12.8	Pre-hospital clinical impression OFAST positive OFAST negative (suspected stroke) OOther		